

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
STANDARD ANNULAR PRESSURE TEST

Operator OIL ENERGY CORP.  
Address 954 BUSINESS PARK DR., SUITE 5  
TRAVERSE CITY, MI 49686

State Permit No. 49929  
USEPA Permit No. MI-137-2D-0297  
Date of Test 10-17-13  
Well Type CLASS II

Well Name STATE HAYES D3-24 SWD

LOCATION INFORMATION NE Quarter of the SW Quarter of the SE Quarter  
of Section 24 ; Range 4W ; Township 30N ; County OTSEGO ;

Company Representative TED KUCHARUK ; Field Inspector Ken Goppock II Double check services

Type of Pressure Gauge Barton 10 inch face; 5000 psi full scale; 50 psi increments;

New Gauge? Yes ☐ No ☒ If no, date of calibration 8-20-13 Calibration certification submitted? Yes ☒ No ☐

**TEST RESULTS**

Readings must be taken at least every 10 minutes for a minimum of 30 minutes for Class II, III and V wells and 60 minutes for Class I wells.

For Class II wells, annulus pressure should be at least 300 psig. For Class I wells, annulus pressure should be the greater of 300 psig or 100 psi above maximum permitted injection pressure.

Original chart recordings must be submitted with this form.

5-year or annual test on time? Yes ☐ No ☐

2-year test for TA'd wells on time? Yes ☐ No ☐

After rework? Yes ☒ No ☐

Newly permitted well? Yes ☐ No ☐

Time	Pressure (in psig)	
	Annulus	Tubing
<u>2:25 PM</u>	<u>380 psi</u>	
<u>2:30</u>	<u>380 psi</u>	
<u>2:35</u>	<u>380 psi</u>	
<u>2:40</u>	<u>380 psi</u>	
<u>2:45</u>	<u>380 psi</u>	
<u>2:50</u>	<u>380 psi</u>	
<u>2:55</u>	<u>380 psi</u>	
	<u>No change in Pressure Held 30 min</u>	

Casing size 4 1/2"  
Tubing size 2 3/8"  
Packer type AD-1  
Packer set @ 2183'  
Top of Permitted Injection Zone 2258'  
Is packer 100 ft or less above top of  
Injection Zone ? Yes ☒ No ☐  
If not, please submit a justification.  
Fluid return (gal.) 2 GALS

Comments:

Test Pressures: Max. Allowable Pressure Change: Initial test pressure x 0.03 \_\_\_\_\_ psi  
Test Period Pressure change 0 psi

Test Passed ☒ Test Failed ☐

If failed test, well must be shut in, no injection can occur, and USEPA must be contacted within 24 hours. Corrective action needs to occur, the well retested, and written authorization received before injection can recommence.

I certify under penalty of law that this document and all attachments are, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (See 40 CFR 144.32(d))

TED KUCHARUK Ted Kucharuk 10-17-2013  
Printed Name of Company Representative Signature of Company Representative Date